ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-02594A Thim Water Corporation PO Box 13145 Tucson, AZ 85732

RECEIVED -

ACC UTILITIES DIRECTOR

ANNUAL REPORT Water

FOR YEAR ENDING

12 31 2010

FOR COMMISSION USE

ANN 04 10

3-25-11

COMPANY INFORMATION

| Mailing AddressPO Box (Street) | 13145 | | |
|---|--|--|-----------------------------------|
| (Street) | | 8573 | 2 |
| (City) | (State) | (Zip) | |
| 520-290-1255 | 520-290-8999 | | |
| Telephone No. (Include Area Code) | 520-290-8999 Fax No. (Include Area Code) | Cell No. (Include | e Area Code |
| Email Address | | | |
| Local Office Mailing Addresssa | me(Street) | | |
| | | | |
| (City) | (State) | (Zip) | |
| Level Office Telephone No. (Include Area Code |) Fax No. (Include Area Code) | Cell No. (Include | : Area Code) |
| Local Office Telephone No. (metude Area Code | | | |
| Email Address | | | |
| Email Address | | <u> </u> | |
| Email Address | | <u> </u> | |
| Email Address | NAGEMENT INFORMATIO | <u>)N</u> Secretary/T | 'reasurer_ |
| Email Address | NAGEMENT INFORMATIO | <u>DN</u> | 'reasurer_ |
| Email Address MA Management Contact: | NAGEMENT INFORMATIO | <u>)N</u> Secretary/T | 'reasurer_ |
| Email Address MA Management Contact: same | NAGEMENT INFORMATIO Cindy Shumate (Name) | Secretary/T (Title) | 'reasurer_ (Zip) |
| Management Contact:same (Street) | Cindy Shumate(Name) (City) Fax No. (Include Area Code) | Secretary/T (Title) (State) | 'reasurer_ (Zip) |
| Management Contact: Same (Street) Telephone No. (Include Area Code) | Cindy Shumate(Name) (City) Fax No. (Include Area Code) Charles Thim | Secretary/T (Title) (State) | 'reasurer_ (Zip) Area Code) |
| Management Contact: Same (Street) Telephone No. (Include Area Code) Email Address | | Secretary/T (Title) (State) Cell No. (Include | 'reasurer_ (Zip) Area Code) |
| Management Contact: Same (Street) Telephone No. (Include Area Code) Email Address On Site Manager: | Cindy Shumate (Name) (City) Fax No. (Include Area Code) Charles Thim (Name) | Secretary/T (Title) (State) Cell No. (Include | 'reasurer_ (Zip) Area Code) |
| Management Contact:same (Street) Telephone No. (Include Area Code) Email Address On Site Manager: | Cindy Shumate(Name) (City) Fax No. (Include Area Code) Charles Thim | Secretary/T (Title) (State) Cell No. (Include | 'reasurer_ (Zip) Area Code) |

| Statutory Agent:R | | | |
|-------------------------------------|---|-------------------|------------------|
| same | (Name) | | |
| (Street) | (City) | (State) | (Zip) |
| Telephone No. (Include Area Code) | Fax No. (Include Area Code | Cell No. (In | clude Area Code) |
| Attorney:Larry Ro | | | |
| PO Box 1448 | (Name) Tubac AZ 85646 | | |
| (Street) 520-398-0411 | (City) 520-398-0412 | (State) | (Zip) |
| Telephone No. (Include Area Code) | Fax No. (Include Area Code) | Cell No. (In | clude Area Code) |
| Email Address | | | |
| | OWNERSHIP INFORMATION | <u>ON</u> | |
| Check the following box that applie | es to your company: | | |
| Sole Proprietor (S) | C Corporation (| C) (Other than As | sociation/Co-op) |
| Partnership (P) | x Subchapter S Cor | poration (Z) | |
| ☐ Bankruptcy (B) | Association/Co-o | op (A) | |
| Receivership (R) | Limited Liability | Company | |
| Other (Describe) | | | |
| | COUNTIES SERVED | | |
| Check the box below for the county | /ies in which you are certificated to p | rovide service: | |
| □ АРАСНЕ | ☐ COCHISE | ☐ COCONI | INO |
| ☐ GILA | ☐ GRAHAM | ☐ GREENI | LEE |
| ☐ LA PAZ | ☐ MARICOPA | ☐ MOHAV | E |
| ☐ NAVAJO | x PIMA | ☐ PINAL | |
| ☐ SANTA CRUZ | ☐ YAVAPAI | ☐ YUMA | |
| ☐ STATEWIDE | | | |

UTILITY PLANT IN SERVICE

| Acct. | | Original | Accumulated | O.C.L.D. |
|-------|---|-----------|-------------------|--------------|
| No. | DESCRIPTION | Cost (OC) | Depreciation (AD) | (OC less AD) |
| 301 | Organization | 100 | | 100 |
| 302 | Franchises | 250 | | 250 |
| 303 | Land and Land Rights | 1,000 | | 1,000 |
| 304 | Structures and Improvements | | | |
| 307 | Wells and Springs | 61,500 | 24,600 | 36,900 |
| 311 | Pumping Equipment | 3,000 | 3,000 | |
| 320 | Water Treatment Equipment | | | |
| 330 | Distribution Reservoirs and Standpipes | | | |
| 331 | Transmission and Distribution Mains | 7,168 | 7,168 | |
| 333 | Services | 3,200 | 2,880 | 320 |
| 334 | Meters and Meter Installations | 3,200 | 2,880 | 320 |
| 335 | Hydrants | | | |
| 336 | Backflow Prevention Devices | | | |
| 339 | Other Plant and Misc. Equipment | | | |
| 340 | Office Furniture and Equipment | 300 | 300 | |
| 341 | Transportation Equipment | 6,025 | 6,025 | |
| 343 | Tools, Shop and Garage Equipment | | | |
| 344 | Laboratory Equipment | | | |
| 345 | Power Operated Equipment | | | |
| 346 | Communication Equipment | | | |
| 347 | Miscellaneous Equipment | | | |
| 348 | Other Tangible Plant | | | |
| | TOTALS | \$85,743 | 46,853 | 38,890 |

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

| Acct. | DESCRIPTION Cost (1) | | Depreciation Percentage (2) | Depreciation Expense (1x2) | |
|-------|--|-------|-----------------------------------|-----------------------------|--|
| 301 | Organization | 100 | | | |
| 302 | Franchises | 250 | | | |
| 303 | Land and Land Rights | 1000 | | | |
| 304 | Structures and Improvements | | | | |
| 307 | Wells and Springs | 61500 | 5% | 3,075 | |
| 311 | Pumping Equipment | 3000 | 5% | 50 | |
| 320 | Water Treatment Equipment | | | | |
| 330 | Distribution Reservoirs and Standpipes | | | | |
| 331 | Transmission and Distribution Mains | 7168 | 5% | | |
| 333 | Services | 3200 | 5% | 160 | |
| 334 | Meters and Meter Installations | 3200 | 5% | 160 | |
| 335 | Hydrants | | | | |
| 336 | Backflow Prevention Devices | | | | |
| 339 | Other Plant and Misc. Equipment | | | | |
| 340 | Office Furniture and Equipment | 309 | 5% | | |
| 341 | Transportation Equipment | 6025 | 5% | | |
| 343 | Tools, Shop and Garage Equipment | | | | |
| 344 | Laboratory Equipment | | | | |
| 345 | Power Operated Equipment | | | | |
| 346 | Communication Equipment | | | | |
| 347 | Miscellaneous Equipment | | | | |
| 348 | Other Tangible Plant | | | | |
| | TOTALS | 85743 | 5% | 3,445 | |

This amount goes on the Comparative Statement of Income and Expense _ Acct. No. 403.

BALANCE SHEET

| Acct No. | | BALANCE AT BEGINNING OF | BALANCE AT END OF |
|-------------|---|----------------------------|----------------------|
| 110. | ASSETS | YEAR | YEAR |
| | CURRENT AND ACCRUED ASSETS | | |
| 131 | Cash | \$5,222 | \$38,352 |
| 134 | Working Funds | | |
| 135 | Temporary Cash Investments | | |
| 141 | Customer Accounts Receivable | | |
| 146 | Notes/Receivables from Associated Companies | | |
| 151 | Plant Material and Supplies | | |
| 162 | Prepayments | | |
| 174 | Miscellaneous Current and Accrued Assets | | *** |
| | TOTAL CURRENT AND ACCRUED ASSETS | | |
| ****** | | \$5,222 | \$38,352 |
| - 113 | FIXED ASSETS | | |
| 101 | Utility Plant in Service | \$85,743 | \$85,743 |
| 103 | Property Held for Future Use | | |
| 105 | Construction Work in Progress | | |
| 108 | Accumulated Depreciation – Utility Plant | (43,408) | (46,853) |
| 121 | Non-Utility Property | | 4.17.4 |
| 122 | Accumulated Depreciation – Non Utility | | |
| | TOTAL FIXED ASSETS | \$42,335 | \$38,890 |
| | TOTAL ASSETS | \$47,557 | \$76,742 |

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

| Acct. No. | | BALANCE AT BEGINNING OF | BALANCE AT END OF |
|--------------|---|---|----------------------|
| | LIABILITIES | YEAR | YEAR |
| | CURRENT LIABILITES | | |
| 231 | Accounts Payable | \$ | \$ |
| 232 | Notes Payable (Current Portion) | | |
| 234 | Notes/Accounts Payable to Associated Companies | 5,000 | 5,000 |
| 235 | Customer Deposits | 3,138 | 2,588 |
| 236 | Accrued Taxes | | |
| 237 | Accrued Interest | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 241 | Miscellaneous Current and Accrued Liabilities | 250 | 250 |
| | TOTAL CURRENT LIABILITIES | \$8,388 | \$7,838 |
| | LONG-TERM DEBT (Over 12 Months) | | |
| 224 | Long-Term Notes and Bonds | \$57,281 | \$57,281 |
| | | | |
| | DEFERRED CREDITS | | |
| 251 | Unamortized Premium on Debt | \$ | \$ |
| 252 | Advances in Aid of Construction | | |
| 255 | Accumulated Deferred Investment Tax Credits | | |
| 271 | Contributions in Aid of Construction | | |
| 272 | Less: Amortization of Contributions | | |
| 281 | Accumulated Deferred Income Tax | | |
| | TOTAL DEFERRED CREDITS | \$ | \$ |
| | TOTAL LIABILITIES | \$65,669 | \$65,119 |
| <u> </u> | CAPITAL ACCOUNTS | | |
| 201 | Common Stock Issued | \$241,696 | \$241,696 |
| 211 | Paid in Capital in Excess of Par Value | | |
| 215 | Retained Earnings | (259,808) | (230,073) |
| 218 | Proprietary Capital (Sole Props and Partnerships) | | |
| | TOTAL CAPITAL | \$(18,112) | \$11,623 |
| | TOTAL LIABILITIES AND CAPITAL | \$47,557 | \$76,742 |

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

| Acct. No. | OPERATING REVENUES | PRIOR YEAR | CURRENT YEAR | |
|--------------------|---|------------|--------------|--|
| 461 | Metered Water Revenue | \$39,726 | \$49,903 | |
| 460 | Unmetered Water Revenue | | 25,000 | |
| 474 | Other Water Revenues | 150 | 75 | |
| | TOTAL REVENUES | \$39,876 | \$79,978 | |
| | OPERATING EXPENSES | | | |
| 601 | Salaries and Wages | \$ | \$ | |
| 610 | Purchased Water | | | |
| 615 | Purchased Power | 10,135 | 10,309 | |
| 618 | Chemicals | | | |
| 620 | Repairs and Maintenance | | 3,050 | |
| 621 | Office Supplies and Expense | | 188 | |
| 630 | Outside Services | 11,965 | 17,922 | |
| 635 | Water Testing | 3,246 | 520 | |
| 641 | Rents | | | |
| 650 | Transportation Expenses | | | |
| 657 | Insurance – General Liability | 1,179 | 1,179 | |
| 659 | Insurance - Health and Life | | | |
| 666 | Regulatory Commission Expense – Rate Case | | | |
| 675 | Miscellaneous Expense | 2,008 | 2,545 | |
| 403 | Depreciation Expense | 3,545 | 3,445 | |
| 408 | Taxes Other Than Income | 2,030 | 3,014 | |
| 408.11 | Property Taxes | 3,010 | 2,901 | |
| 409 | Income Tax | Sub S | Sub S | |
| | TOTAL OPERATING EXPENSES | \$37,118 | \$45,073 | |
| | OPERATING INCOME/(LOSS) | \$2,758 | \$29,905 | |
| | OTHER INCOME/(EXPENSE) | | | |
| 419 | Interest and Dividend Income | \$ | \$ | |
| $-\frac{417}{421}$ | Non-Utility Income | 340 | 330 | |
| 426 | Miscellaneous Non-Utility Expenses | (122) | (550) | |
| $\frac{120}{427}$ | Interest Expense | (3,299) | (493) | |
| 127 | TOTAL OTHER INCOME/(EXPENSE) | \$(3,081) | \$(220) | |
| | NET INCOME/(LOSS) | \$(323) | \$29,192 | |

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

| | LOAN #1 | LOAN #2 | LOAN #3 | LOAN #4 |
|------------------------|----------------|----------|---------|----------|
| | 9/83 | | | |
| Date Issued | | | | |
| | Capmark | | | |
| Source of Loan | | | | |
| | Assumed with | | | |
| ACC Decision No. | Purchase | | | |
| | Distribution | | | |
| Reason for Loan | System | | | |
| D 11 A | Φ114 000 | . | Φ. | . |
| Dollar Amount Issued | \$114,000 | \$ | \$ | \$ |
| Amount Outstanding | \$ | \$ | \$ | \$ |
| | 9/23 (paid off | | | |
| Date of Maturity | in 2010) | | | |
| Interest Rate | 5% | % | % | % |
| Current Year Interest | \$493 | \$ | \$ | \$ |
| Current Year Principle | \$64324 | \$ | \$ | \$ |

| Meter Deposit Balance at Test Year End | \$ | |
|--|----|--|
| Meter Deposits Refunded During the Test Year | \$ | |

| COMPANY NAME | Thim Water Corporation |
|-----------------|--|
| Name of System: | ADEQ Public Water System Number: 10206 AND 10207 |

WATER COMPANY PLANT DESCRIPTION

WELLS

| ADWR ID Number* | Pump Horsepower | Pump Yield (gpm) | Casing Depth (Feet) | Casing Diameter (Inches) | Meter Size (inches) | Year Drilled |
|--------------------|--------------------|---------------------|---------------------|--------------------------|------------------------|-----------------|
| 55-504861 | 15 | 95 | 446 | 12 | 3 | |
| 55-208086 | 15 | 107 | 480 | 8 | 3 | 2006 |
| 55-504860 | (2) 5 | 76 | 345 | 8 | 1.5 | |
| | | | | | | |
| 4.00-20 | | | | | | |

^{*} Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

| Name or Description | Capacity (gpm) | Gallons Purchased or Obtained (in thousands) |
|---------------------|----------------|--|
| | | |

| BOOSTER PUMPS | | FIRE HYDRANTS | |
|---------------------|---|----------------------------|--|
| Horsepower Quantity | | Quantity Standard Quantity | |
| 1.5 | 2 | 5 | |
| 5 | 3 | | |
| | | | |
| | | | |

| STORAGE TANKS | | PRESSURE TANKS | | | |
|---------------|--|----------------|----------|----------|--|
| Capacity | | Quantity | Capacity | Quantity | |
| 6000 | | 3 | 5000 | 1 | |
| 2500 | | 1 | 1500 | 1 | |

Note: If you are filing for more than one system, please provide separate sheets for each system.

Name of System:

ADEQ Public Water System Number: 10206 and 10207

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

| Size (in inches) | Material | Length (in feet) |
|------------------|------------|------------------|
| 2 | <u>PVC</u> | <u>150</u> |
| 3 | | |
| 4 | <u>Pvc</u> | <u>14,200</u> |
| 5 | | |
| 6 | <u>Pvc</u> | 40,810 |
| 8 | | |
| 10 | | |
| 12 | | |
| | | |
| | | |
| | | |
| | | |
| | | |

CUSTOMER METERS

| COSTONIER | | | | |
|-----------------------------------|------------|--|--|--|
| Size (in inches) | Quantity | | | |
| 5/8 X ³ / ₄ | <u>136</u> | | | |
| 3/4 | | | | |
| 1 | | | | |
| 1 1/2 | <u>5</u> | | | |
| 2 | <u>I</u> | | | |
| Comp. 3 | | | | |
| Turbo 3 | | | | |
| Comp. 4 | | | | |
| Turbo 4 | | | | |
| Comp. 6 | | | | |
| Turbo 6 | | | | |
| | | | | |
| | | | | |
| L | 1 | | | |

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:

STRUCTURES:

OTHER:

Note: If you are filing for more than one system, please provide separate sheets for each system.

| COMPANY NAME: Thim Water Corporation | n |
|---|--|
| Name of System: | ADEQ Public Water System Number: 10206 POE 1 and 2 |

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

| MONTH | NUMBER OF CUSTOMERS | GALLONS SOLD (Thousands) | GALLONS PUMPED (Thousands) | GALLONS PURCHASED (Thousands) |
|-----------|------------------------|--------------------------------|----------------------------|-------------------------------------|
| JANUARY | 146 | 1098 | 1148 | 0 |
| FEBRUARY | 145 | 511 | 532 | 0 |
| MARCH | 144 | 760 | 732 | 0 |
| APRIL | 143 | 921 | 1021 | 0 |
| MAY | 144 | 1386 | 1503 | 0 |
| JUNE | 144 | 1379 | 1973 | 0 |
| JULY | 143 | 2115 | 2498 | 0 |
| AUGUST | 142 | 1352 | 1745 | 0 |
| SEPTEMBER | 144 | 1466 | 1814 | 0 |
| OCTOBER | 144 | 1356 | 1543 | 0 |
| NOVEMBER | 146 | 1196 | 1326 | 0 |
| DECEMBER | 147 | 1064 | 1491 | 0 |
| | TOTALS → | 14,604 | 17,326 | 0 |

| What is the level of arsenic for each well on your system? .0043mg/l (If more than one well, please list each separately.) |
|--|
| If system has fire hydrants, what is the fire flow requirement?GPM forhrs |
| If system has chlorination treatment, does this treatment system chlorinate continuously? () Yes () No |
| Is the Water Utility located in an ADWR Active Management Area (AMA)? () Yes () No |
| Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement? () Yes (x) No |
| If yes, provide the GPCPD amount: |

Note: If you are filing for more than one system, please provide separate data sheets for each system.

| COMPANY NAME: Thim Water Corporatio | n |
|--|--|
| Name of System: | ADEQ Public Water System Number: 10207 |

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

| MONTH | NUMBER OF CUSTOMERS | GALLONS SOLD | GALLONS PUMPED | GALLONS PURCHASED |
|-----------|------------------------|-----------------|-------------------|----------------------|
| | | (Thousands) | (Thousands) | (Thousands) |
| JANUARY | 5 | 14 | 67 | 0 |
| FEBRUARY | 5 | 12 | 43 | 0 |
| MARCH | 5 | 44 | 84 | 0 |
| APRIL | 5 | 15 | 46 | 0 |
| MAY | 5 | 25 | 88 | 0 |
| JUNE | 5 | 58 | 79 | 0 |
| JULY | 5 | 69 | 70 | 0 |
| AUGUST | 5 | 12 | 52 | 0 |
| SEPTEMBER | 5 | 132 | 200 | 0 |
| OCTOBER | 5 | 920 | 941 | 0 |
| NOVEMBER | 5 | 1795 | 1999 | 0 |
| DECEMBER | 5 | 1528 | 1553 | 0 |
| | TOTALS → | 4,624 | 5,222 | 0 |

| What is the level of arsenic for each well on your system? .0043mg/l (If more than one well, please list each separately.) | |
|--|----|
| If system has fire hydrants, what is the fire flow requirement?GPM forhrs | |
| If system has chlorination treatment, does this treatment system chlorinate continuously () Yes () No | y? |
| Is the Water Utility located in an ADWR Active Management Area (AMA)? () Yes () No | |
| Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement () Yes (x) No | [? |
| If yes provide the GPCPD amount: | |

Note: If you are filing for more than one system, please provide separate data sheets for each system.

| COMPANY NAME: Thim Water Corporation | | |
|--------------------------------------|--|--|
| Name of System: | ADEQ Public Water System Number: 10206 and 10207 | |

UTILITY SHUTOFFS / DISCONNECTS

| MONTH | Termination without Notice R14-2-410.B | Termination with Notice R14-2-410.C | OTHER |
|-----------|---|--|-------|
| JANUARY | 0 | 2 | |
| FEBRUARY | 0 | 0 | |
| MARCH | 0 | Ī | |
| APRIL | 0 | 1 | |
| MAY | 0 | 0 | |
| JUNE | 0 | 1 | |
| JULY | 0 | 1 | |
| AUGUST | 0 | 2 | |
| SEPTEMBER | 0 | 3 | |
| OCTOBER | 0 | 4 | |
| NOVEMBER | 0 | 1 | |
| DECEMBER | 0 | 1 | |
| TOTALS — | 0 | 17 | 0 |

| OTHER (description): | | | | | |
|----------------------|--|--|------|------|--|
| | | angka ngakan ngangga kang ngaka samba kanta kang ngang na mang ngang ngang ngang ngang ngang ngang ngang ngang | | ., | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| COMPANY NAME | Thim Water Corporation | YEAR ENDING 12/31/2010 |
|----------------------------|--|------------------------|
| | PROPERTY TAXES | |
| Amount of actual property | y taxes paid during Calendar Year 2010 was: | \$2,901 |
| | ort proof (e.g. property tax bills stamped "paid fany and all property taxes paid during the cal | |
| If no property taxes paid, | explain why | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

| | Tax | <u>kes</u> | | | |
|-----------------------------------|---|---------------|-------------------|--------------|----------------|
| ERIFICATION | | | | ACCUTE | |
| | COUNTY OF (COUNTY NAME) | Pima | | - vill | TITES DIRECTOR |
| STATE OFArizona | NAME (OWNER OR | OFFICIAL) TIT | LE Robin Thim | | |
| I, THE UNDERSIGNED | COMPANY NAME | Thim W | ater Corpora | ation | |
| OF THE | COMPANY NAME | THERE Y | ater corpor. | 462044 | |
| | | | | | |
| DO SAY THAT THIS AN | | OPERTY | TAX AND | SALES TAX R | EPORT TO THE |
| ARIZONA CORPORATIO | N COMMISSION | | | | |
| FOR THE YEAR ENDIN | MONTO | | DAY 31 | YEAR 2010 | |
| FOR THE YEAR ENDIN | | | | | |
| INFORMATION A SWORN STATEMENT | AND BELLEF. | | | | |
| I HEREBY ATTES AND PAID IN FUL | T THAT ALL PROPI L. | ERTY TA | XES FOR SA | AID COMPANY | ARE CURREN |
| I HEREBY ATTES PAID IN FULL. | T THAT ALL SALES | S TAXES | FOR SAID O | COMPANY ARI | E CURRENT AN |
| | | /6 | CC | | |
| | <u>/_</u> | SIGN | ATURE OF OWNER OF | OFFICIAL | |
| | | | 520-290-1255 | | |
| SUBSCRIBED AND SWORN T | ro before me | TELE | PHONE NUMBER | | |
| A NOTARY PUBLIC IN AND | | CONTRACTOR | ME Pima | | |
| | y L. Shumate Public A Aritolia | COUNTY NA | Ma - 1 | 20// | _ |
| My Con | ima County nmission Expires pril 25, 2011 | MONTH | Varer | 2 20// | 7- |

MY COMMISSION EXPIRES 4/25/11

| COMPANY NAME Thim Water Corporation YEAR ENDING 12/31/2010 | |
|--|-----------------------------|
| INCOME TAXES | |
| For this reporting period, provide the following: | |
| Federal Taxable Income Reported Estimated or Actual Federal Tax Liability | |
| State Taxable Income Reported Estimated or Actual State Tax Liability | |
| Amount of Grossed-Up Contributions/Advances: | |
| Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances | |
| Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refund any Payer or if any gross-up tax refunds have already been made, attach the following informat name and amount of contribution/advance, the amount of gross-up tax collected, the amount of each Payer, and the date the Utility expects to make or has made the refund to the Payer. | ds are due to ion by Payer: |
| CERTIFICATION | |
| The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reprior year's annual report. This certification is to be signed by the President or Chief Executive corporation; the managing general partner, if a partnership; the managing member, if a lin company or the sole proprietor, if a sole proprietorship. | e Officer, if a |
| SIGNATURE DATE | |
| PRINTED NAME TITLE | |

VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

ACC UTILITIES DIRECTOR

| VFR | IFIC | ΔTI | \mathbf{ON} |
|-----|------|-------------|---------------|

STATE OF __Arizona___

I, THE UNDERSIGNED

OF THE

| _ | COUNTY OF (COUNTY NAME) Pima | |
|---|---|--|
| | NAME (OWNER OR OFFICIAL) TITLE Robin Thim , President | |
| | COMPANY NAME Thim Water Corporation | |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

| MONTH | DAY | YEAR |
|-------|-----|------|
| 12 | 31 | 2010 |

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

MY COMMISSION EXPIRE

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

49,978

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 3,014 IN SALES TAXES BILLED, OR COLLECTED) **REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE SIGNATURE OF OWNER OR OFFICIAL STATEMENTS THAT RECONCILE THE 520-290-1255 **DIFFERENCE. (EXPLAIN IN DETAIL)** TELEPHONE NUMBER SUBSCRIBED AND SWORN TO BEFORE ME COUNTY NAME PIMA A NOTARY PUBLIC IN AND FOR THE COUNTY OF THIS 20/ March MONTH 1105, 25 lingA My Commission Expires (SEAL) Pima County Motary Public - Arizona Ciudy L. Shumate

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

RECEIVED

Intrastate Revenues Only

VERIFICATION

ACC UTILITIES DIRECTOR

| STATE OF ARIZONA | COUNTY OF (COUNTY NAME) PIMA | | |
|--------------------|-------------------------------------|-----------------|--|
| I, THE UNDERSIGNED | NAME (OWNER OR OFFICIAL) Robin Thim | титье President | |
| OF THE | COMPANY NAME Thim Water Corporation | | |

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE UTILITY OPERATIONS</u> RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

| ARIZONA INTRASTATE GROSS OPERATING REVENUES | THE AMOUNT IN BOX AT LEFT INCLUDES \$ 3,014 |
|--|---|
| \$49,978 | IN SALES TAXES BILLED, OR COLLECTED) |
| *RESIDENTIAL REVENUE REPORTED ON THIS PA MUST INCLUDE SALES TAXES BILLED. | STGNATURE OF OWNER OR OFFICIAL. |
| | 520-290-1255 TELEPHONE NUMBER |
| CURCOIRED AND SWORN TO REFORE | ME NOTARY PUBLIC NAME () () |

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

231L

DAY OF

COUNTY NAME Pima

MONTH March .20//

(SEAL)

MY COMMI



X SIGNATURE OF MOTARY PUBLIC